

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Christine Gorham
 Name
 (2) 1105 Thomas St.
 Address (number and street)
Key West, FL. 33040
 City, State, Zip Code

OFFICE USE ONLY

RECEIVED
 CITY CLERK'S OFFICE
 CITY OF KEY WEST
 KEY WEST, FLORIDA
 2015 DEC 28 PM 3:20

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Utility Board Group IV

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 10/02/15 To 12/22/15 Report Type: TR

☒ Original ☐ Amendment ☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ 0

Loans \$ _____ 0

Total Monetary \$ _____ 0

In-Kind \$ _____ 0

(7) Expenditures This Report

Monetary Expenditures \$ _____ 1,457.78

Transfers to Office Account \$ _____

Total Monetary \$ _____ 1,457.78

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ _____ 3,540.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ 3,540.00

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Christine Gorham

Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Christine Gorham
 Signature

(Type name) Christine Gorham

☒ Candidate ☐ Chairperson (only for PC and PTY)

X Christine Gorham
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Christine Gorham

(2) I.D. Number _____

(3) Cover Period 10, 02, 15 through 12, 22, 15

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
12/08/15	Gorham, Christine 1105 Thomas St. Key West, FL 33040	Reimburse	RMB		400. ⁰⁰
01					
12/08/15	Gorham, Christine 1105 Thomas St. Key West, FL 33040	Reimburse	RMB		115. ¹⁹
02					
12/08/15	VNA Hospice of the FL Keys, Inc. 1319 WILLIAM ST.	Disposition of Funds	DIS		427. ⁷⁸
03					
12/30/15	Christine Gorham 1105 Thomas Key West, FL	Food + Beverage to 5/10/15	CAN	None	514. ⁸¹
04					
11					
11					
11					
11					